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NAME OF COMMITTEE (In Full)  Society for Vascular Surgery Political Action Committee  Full Name (Last, First, Middle Initial)  DEBBIE STABENOW  Mailing Address 7143 STEEPLE CHASE  City State Zip Code Mil 48917  Purpose of Disbursement  Candidate Name DEBBIE STABENOW  Office Sought: House President State: A District: 01  Full Name (Last, First, Middle Initial)  District: 00  Full Name (Last, First, Middle Initial)  City Sanate President State: A District: 01  Full Name (Last, First, Middle Initial)  Mike Mil. 7HOMPSON  Office Sought: X House Senate President State: CA District: 01  Full Name (Last, First, Middle Initial)  Candidate Name District: 01  Full Name (Last, First, Middle Initial)  Candidate Name Office Sought: X House Senate President State: CA District: 01  Full Name (Last, First, Middle Initial)  Candidate Name Office Sought: X House Senate President State: CA District: 01  Full Name (Last, First, Middle Initial)  Cherk (specify) ▼  Transaction ID: SB23.4278  Date of Disbursement Tippe  Category/ Type  Transaction ID: SB23.4278  Date of Disbursement Tippe  Category/ Type  Transaction ID: SB23.4278  Date of Disbursement Tippe  Category/ Type  Transaction ID: SB23.4278  Date of Disbursement Tippe  Category/ Type  Transaction ID: SB23.4278  Date of Disbursement Tippe  Category/ Type  Transaction ID: SB23.4278  Date of Disbursement Tippe  Category/ Type  Transaction ID: SB23.4278  Date of Disbursement Tippe  Category/ Type  Transaction ID: SB23.4278  Date of Disbursement Tippe  Category/ Type  Transaction ID: SB23.4278  Date of Disbursement Tippe  Transaction ID: SB23.4288  Date of Disbursement Tippe  Transaction ID: SB23.428	TEMIZED DISBURSEMENTS	Detailed Sum	mary Page	21	lb	2 X 8a	28b	280	: 🗌 2	29
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DEBBIE STABENOW  Mailing Address 7143 STEEPLE CHASE  City State Zip Code MI 48917  Purpose of Disbursement  Candidate Name DEBBIE STABENOW  Office Sought: House X Senate President State: MI District: 00  Full Name (Last, First, Middle Initial) Mike MR. THOMPSON  Office Sought: X House St. Helena CA 94574  Purpose of Disbursement  Candidate Name Chargory/ Type  City State Zip Code St. Helena CA 94574  Purpose of Disbursement  Candidate Name Chargory/ Type  Disbursement For: 2012  X Primary General Other (specify) ▼  Transaction ID: SB23, 4278  Date of Disbursement this Pc  Category/ Type  Amount of Each Disbursement this Pc  Category/ Type  Transaction ID: SB23, 4278  Date of Disbursement this Pc  Category/ Type  Transaction ID: SB23, 4268  Date of Disbursement this Pc  Category/ Type  Transaction ID: SB23, 4268  Date of Disbursement this Pc  Category/ Type  Transaction ID: SB23, 4268  Date of Disbursement this Pc  Category/ Type  Category/ Type  City State CA District: 01  Full Name (Last, First, Middle Initial)  CHRIS VAN HOLLEN  Mailing Address 10537 ST PAUL STREET  City State Zip Code MD 20895  Purpose of Disbursement  Candidate Name CHRIS VAN HOLLEN  Office Sought: X House Disbursement For: 2008  Purpose of Disbursement  Candidate Name CHRIS VAN HOLLEN  Office Sought: X House Disbursement For: 2008  Primary X General  Primary X General  Primary X General  Other (specify) ▼  Amount of Each Disbursement Type  Category/ Type  Amount of Each Disbursement Type  Category/ Type  Other (specify) ▼  Amount of Each Disbursement Type  Category/ Type  Other (specify) ▼  Amount of Each Disbursement Type  Category/ Type  Other (specify) ▼  Amount of Each Disbursement Type  Category/ Type  Other (specify) ▼  Category/ Type  Other (specify) ▼  Other (specify) ▼  Amount of Each Disbursement Type  Category/ Type  Other (specify) ▼	, , ,									
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